PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

241516 US90

CLAIMS AS FILED - PART I (Column 1)						(Column 2) SMALL ENTITY TYPE TYPE			ITITY □	OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			24				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA	E	BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	2 U minus 20=		*	4		X\$ 9=		OR	X\$18=	12
IND	EPENDENT CL	AIMS	∟(minus 3 =		*	1		X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=	0
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL		OR	TOTAL	906
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL E	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus			=		X42=		OR	X84=	
	FIRST PRESE	NIATION OF MI	JUIPLE DEF	ZENDENI	CLAIM		ſ	+140=		OR	+280=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	. ^	DD11.1 E.E.			ADDIT: I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus *** ULTIPLE DEPENDENT		CLAINA	=		X42=		OR	X84=	
	FINST PRESE	NIATION OF MI	JEHPLE DEF	ENDENI	CLAIN			+140=		OR	+280=	
							L A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u></u>		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT						 -	+140=			+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											